



Australian Speak Easy

Association Inc. [www.speakeasy.org.au](http://www.speakeasy.org.au)

Victorian Branch

Email: [vicsea@speakeasy.org.au](mailto:vicsea@speakeasy.org.au)

Send to:  
The Treasurer  
35 Ryans Road  
Eltham VIC 3095  
Ph: 03 9439 9482

## **Membership/Donations Form**

*Our membership period is from 1st January to 31st December each year*

**Please accept my payment for membership of the ASEA.**

### **Membership Type:**

**\$35** - Normal renewal

**\$20** - Concession renewal (concession card holder/full time student or junior under 17 years)

I enclose payment for \$ ..... including/or a donation of \$ .....  (Tick if receipt required)  
*(Donations of \$2 and over are tax deductible)*

### **Payment method:**

Direct Deposit - Please transfer funds to BSB 033003, Account Number 850693, Account Name: Victorian Speak Easy Association. Please make sure to include your full name in the reference and also post or email form details back to [vicsea@speakeasy.org.au](mailto:vicsea@speakeasy.org.au).

Visa

Mastercard

Cardholder name: ⇒ .....

Card number: ⇒ .....

Card expiry date: ⇒ .....

Signature: ⇒ ..... Date: ⇒ .....

Cheque – Please make payable to: ‘Victorian Speak Easy Association’  
And post to: 35 Ryans Road, Eltham Vic, 3095

### **My personal details are shown below**

Age group:  under 15  15-19  20-29  30-39  40-49  50+

Category:  Person who stutters (PWS)  Parent of PWS  
 Speech Pathologist/Student  Other:.....

Name: ⇒ .....  Male  Female

Email: ⇒ .....

Postal address: ⇒ ..... Phone (home): ⇒ .....

..... Phone (work): ⇒ .....

..... Mobile: ⇒ .....

Postcode: ⇒ ..... Occupation: ⇒ .....

### **Comments**